PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1 2000

3876-037	•
38 10 051	

CLAIMS AS FILED - PART I						SMALL ENTITY				OR SMALL ENTITY			
			(Column 1)		(Colun	(Column 2)		TYPE			RATE	FEE	
TOTAL CLAIMS			20					RATE	FEE	Ł		710.00	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	/10.00	
TOTAL CHARGEABLE CLAIMS				us 20=	•	4		X\$ 9=	·	OR	X\$18=		
INDEPENDENT CLAIMS 4 n				us 3 =	<u> </u>			X40=	40	OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT							,	+135=	都	OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column								TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II										~D	OTHER SMALL		l
		(Column 1)		(Colu	mn 2)	(Column 3)	SMALL		OR I	SMALL	ADDI-	i
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER MOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL FEE	
	Total	. 19	Minus	•• (30			X\$ 9=		OR	X\$18=		ŀ
MEN	Independent	• 3	Minus	***	.4		4	X40=		OR	X80=		
	FIRST PRESE	NTATION OF N	WLTIPLE DE	PENDEN	IT CLAIM		J	+135=		OR	+270=		1
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE		Ì.
(Column 1) (Column 2) (Column 3)								ADDII. FEE	3				
_		(Column 1)		HK	HEST .		7	:	ADDI-	٠		ADDI-	ŀ
		REMAINING AFTER		PRE\	MBER /IOUSLY D FOR	PRESENT. EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	١
AMENDMENT B	Total	• /)	Minus	**	20	=		X\$ 9=		ОЯ	X\$18=		
N N	Independent	• 2	Minus	***	4	-	4	X40=		OR	X80=		
Ľ	FIRST PRES	ENTATION OF I	MULTIPLE DE	PENDE	NT CLAIN		لـ	+135=		ОЯ	+270=		l
			• •	1	•			TOTAL		OF	TOTAL ADDIT, FEI		1
							۵۱	ADDIT. FEE		_	ADDIT. TE		7
ا نيرا		(Column 1)			lumn 2) GHEST	(Column	"		ADDI-	7		ADDI-	1
AMENDMENT C		REMAINING AFTER	· -	PRE	UMBER VIOUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL	
MEN	Total	AMENDMEN	Minus	PA	ID FOR	=	┪	X\$ 9=	, res	OF	X\$18=		
	Independent	•	Minus			=	┪	X40=	╁	1	Ven-	1	٦
	FIRST PRES	ENTATION OF	MULTIPLE D	EPENDE	NT CLAII	и <u>П</u>			+	_ OF	`	+	1
-								+135=		OF	<u> </u>		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "3."							20."	ADDIT. FEI		OF	ADDIT. FE		_
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													